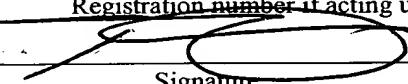




PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) 741890-18
<b>CERTIFICATE OF MAILING OR TRANSMISSION</b> <small>[37 CFR 1.8(a)]</small>	In re Application of: <b>Damien ROSNEY et al.</b>	
	Application Number: 09/936,840	Filed: January 7, 2002
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to Mail Stop <b>Non-Fee Amendment</b> Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450, or being facsimile transmitted to the USPTO at 571-273-8300 on _____.		
Signature: _____ Name: _____		
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.		
The requested extension and appropriate entity fee are as follows (check time period desired):		
<input type="checkbox"/> One month (37 CFR 1.17(a)(1)) - (\$60/\$120) \$ _____ <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) - (\$225/\$450) \$ _____ <input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3)) - (\$510/\$1020) \$ <u>510.00</u> <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) - (\$795/\$1590) \$ _____ <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) - (\$1080/\$2160) \$ _____		
<input checked="" type="checkbox"/> Applicant claims small entity status. <input type="checkbox"/> A check to cover the fee is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>19-2380</u> . I have enclosed a duplicate copy of this sheet.		
<b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>		
I am the <input type="checkbox"/> applicant/inventor <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). <input checked="" type="checkbox"/> attorney or agent of record. Registration No. <u>36,092</u> <input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). <u>Registration number if acting under 37 CFR 1.34(a)</u> _____		
 <u>Signature</u>		<u>October 19, 2005</u> Date
<u>Tim L. Brackett, Jr.</u> Typed or printed name		<u>202-585-8000</u> Telephone Number
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.		
<input type="checkbox"/> Total of _____ forms are submitted.		

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